

**INShape Indiana
Mini-Grant Program
for
Smoking Cessation Projects**

REQUEST FOR PROPOSAL (RFP)

2005-2006



INShape Indiana Mini-Grant Program for Smoking Cessation Projects

Request for Proposal (RFP)

2005/2006

I. Project Description

In support of Governor Mitch Daniels' new INShape Indiana Program, the Indiana Tobacco Prevention and Cessation Agency has funding available for smoking cessation mini-grant projects to raise awareness about the benefits of quitting smoking and to provide information about smoking cessation at the community level.

II. Funding

Grant awards are available for up to \$1000. Recipients will be paid through a stipend at the conclusion of the project.

III. Eligibility

Non-profit organizations of 501-C-3 status and/or community organizations that meet these criteria:

- Have a Federal Identification Number
- Are compliant as an organization with the State of Indiana
- Have a history of community service

IV. How to Apply

Download an application packet from: www.INShapeindiana.org.

Completed applications will be accepted between July 13, 2005 and October 31, 2005.

All grant projects must be completed by April 30, 2006.

Submit one signed original and one photocopy of the application to:

Anita Gaillard
Director of Community Programs
Indiana Tobacco Prevention and Cessation Agency
150 W. Market Street, Suite 406
Indianapolis, IN 46204
(317) 234.1782
agaillard@itpc.in.gov

Grantees may receive consultation from the staff of the Indiana Tobacco Prevention and Cessation Agency by calling 317.234.1787.

V. CHECKLIST for Completed Application

One (1) original signed copy and one (1) photocopy of Form A

One (1) original signed copy and one (1) photocopy of the Required Project Description

W-9 for your organization

No faxed copies will be accepted

VI. Project Requirements

- A. The project must address at least two of the following topics/issues relating to tobacco cessation:
- Plan and conduct a community campaign to reach women of child-bearing age to quit smoking and stay smoke free
 - Partner with local ITPC community or minority based coalition to hold a community event and/or education campaign on targeting the benefits of quitting smoking
 - Recruit health care providers (physicians, nurses, counselors, respiratory therapists, dentists, dental assistants, dental hygienists) for training programs in the state-of-the-art tobacco dependence treatment
 - Recruit health care clinics to adopt a reminder system and policy for counseling smokers to quit
 - Arrange and sponsor an educational program on the benefits of quitting smoking for community organizations, health care organizations and/or business organizations
 - Start a local tobacco-free nurses alliance
 - Conduct a community or organization campaign to promote smoke free homes
 - Promote smoke free worksites to small business owners
 - Work with local beauty and barber shops to promote the benefits of quitting smoking
 - Adopt a school and conduct outreach to every K-5 parent to encourage quitting smoking for the health of students and parents
 - Promote the value of smoke free restaurants to restaurants in your neighborhood
 - Provide information on the benefits of quitting smoking and cessation services to:
 - Head Start parents
 - GED students
 - Faith affiliated men and women's organizations
 - Career centers
 - Law enforcement
 - Public housing
 - Addictions counselors
 - Work One centers
 - Bureau of Motor Vehicles
 - WIC/MCH clinics
 - Trustee offices
 - Other specific organizations
- B. Collaborating with your local health department and/or local ITPC partners must be a part of the plan. For information on local ITPC contacts please visit www.itpc.in.gov/community.asp.
- C. Organizations awarded a grant must agree to submit the End of Project Report and completed voucher no later than **one month** after the ending grant cycle. **Reimbursement will not be made without the submission of this report, the completed voucher and ALL receipts within one month of end of the grant cycle.**
- D. The grant cannot be used to pay for: Construction of buildings or building renovations; depreciation of existing buildings or equipment; contributions, donations, dues to societies, organizations or federations; entertainment; automobile purchases, rental and/or leases; interest and other financial costs; fines and penalties; bad debts; contingency funds; food; political contributions; or to pay for personal items or for expenses that do not related to the purpose of the project.
- E. Written quarterly status reports must be forthcoming.

**INShape Indiana Mini-Grant Program for Smoking Cessation Projects
2005 - 2006 Grant Application Cover Page**

LEAVE BLANK FOR ISDH/TPC USE ONLY	
NUMBER _____	DATE RECEIVED _____

1. Title of Project (Please type or print legibly) _____

2. Organization's Tax Identification Number: _____
(Organizations other than local health departments must also submit a W-9)

3. Total Amount Requested: \$ _____

4. Primary Project Contact: _____

Organization: _____

County: _____

Address: _____

Telephone: (_____) _____ Fax: (_____) _____

E-mail: _____

Amount Requested: _____

Application Certification: To the best of my knowledge, the data and statements in this application are true and correct. The applicant agrees to comply with all State/Federal Statutes and Rules/Regulations applicable to the program.

Printed name of authorized official

Signature

Title

Date

FISCAL CONTACT

Name (Last, First, Middle) : _____

Title: _____

Organization: _____

Address: _____

Telephone: (_____) _____ Fax: (_____) _____

E-mail: _____

FISCAL OFFICER ASSURANCE: I agree to accept responsibility for the fiscal conduct of this project and to provide the required financial reports if a grant is awarded as a result of this application.

Fiscal Officer (signature)

Date

REQUIRED PROJECT DESCRIPTION

Project Title: _____

A. Describe your organization and interest in this project:

B. Which two issues will your project address: (Circle those that apply)

- o Plan and conduct a community campaign to reach women of childbearing age to quit smoking and stay smokefree.
- o Partner with local ITPC community or minority based coalition to hold community events and education campaigns on quitting smoking.
- o Recruit health care providers (physicians, nurses, counselors, respiratory therapist, dentists, dental assistants, dental hygienist) for training programs in the state-of-the-art tobacco dependence treatment.
- o Recruit health care clinics to adopt a reminder system and policy for counseling smokers to quit.
- o Arrange and sponsor an educational program on the benefits of quitting smoking for community organizations, health care organizations and/or business organizations
- o Start a local tobacco-free nurses alliance
- o Conduct a community or organization campaign to promote smoke free homes.
- o Promote smoke free worksites to small business owners.
- o Work with local beauty and barbershops to promote the benefits of quitting smoking.
- o Adopt a school and conduct outreach to every K-5 parent to encourage quitting smoking for the health of students and parents.
- o Promote the value of smoke free restaurants to restaurants in your neighborhood.
- o Provide information on the benefits of quitting smoking and cessation services to: (circle those that apply)
 - Head Start parents
 - GED students
 - Faith affiliated men and women's organization
 - Career centers
 - Law enforcement
 - Public housing
 - Addictions counselors
 - Work One centers
 - Bureau of Motor Vehicles
 - WIC/MCH clinics
 - Trustee offices
 - Other specific organizations

C. List at least three objectives for your project:

D. Describe your workplan to accomplish your objectives. Include a timeline, specific tasks and activities and who will be responsible for accomplishing the task/activity. (Include additional pages as needed.)

E. Provide a one-page project budget that divides estimated expenses into major categories including:

- o Personnel costs
- o Supplies and materials
- o Travel
- o Postage/Shipping and related costs
- o Other costs

Provide a brief narrative describing the main expenses in each section.